## BIRCH, STEWART, KOLASCH & BIRCH, LLP

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

ATTORNEY DOCKET NO. 0717-0521P

PLEASE NOTE:
YOU MUST
COMPLETE THE
FOLLOWING:

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor ( if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SUBSTRATE TRANSFER APPARATUS, METHOD FOR REMOVING THE SUBSTRATE,

AND METHOD FOR ACCOMMODATING THE SUBSTRATE

	THE FILLION TON ACC	OME DESIGNATION OF THE	SUBSTRATE		
Insert Title:	<b></b>				
	the specification of which is attached hereto	o. If not attached hereto,			
Fill in Appropriate Information -	the specification was filed on			as	
For Use	United States Application Numb	er		i	
Without Specification	and amended on		( if app	• •	
Attached:	the specification was filed on		<del></del>		
	International Application Number		; and was		
	anomaci or			_ (if applicable)	
	I acknowledge the duty to disclose infigures infigures infigures infigures infigures infigures infigures information in the same was application, that the invention has not be application in any country foreign to the U more than twelve months (six months for on this invention has been filed in any corepresentatives or assigns, except as follows:	e same was ever known or inted publication in any control in public use or on salen patented or made the sinted States of America or designs) prior to this applicantry foreign to the Uniter ws.	e in the United States of America more subject of an inventor's certificate issue an application filed by me or my legal cation, and that no application for pate d States of America prior to this application.	efore my or our invention eof or more than one year than one year prior to this ed before the date of this representatives or assigns nt or inventor's certificate cation by me or my legal	
	I hereby claim foreign priority benefits under Title 35, United States Code, §119 (a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:				
Insert Priority	Prior Foreign Application(s)		•	Priority Claimed	
Information:	(Number)	Japan	November 29, 2002		
(ii appropriate)	(rumber)	(Country)	(Month / Day / Year Filed)	Yes N	
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No	
Insert Provisional Application(s):	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.				
(if any)	(Application Number)			(Filing Date)	
	(Application Number)			(Filing Date)	
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed more than 12 months (6 months for designs) Prior to the Filing Date of this Application:				
Insert Requested Information: (if appropriate)	Country	App	ication Number Date of I	Date of Filing (Month/Day/Year)	
Insert Prior U.S. Application(s):	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:				
(if any)	(Application Number)	. (Filing Date)	(Status - patented, per	nding, abandoned)	
Page 1 of 2	(Application Number)	(Filing Date)	(Status - patented, per	ading, abandoned)	

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FOLLOWING:					,	
Full Name of First or Sole Inventor:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
Insert Name of Inventor Insert Date This Document is Signed	Takenori	YOSHIZAWA	Takenori Yosh		16. 9, 2003	
Insert Residence	Residence (City, State	**		CITIZENSHIP		
Insert Citizenship	Tsu-shi,	Mie Japan		Jap	an	
Insert Mailing	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Address	812-15, Ishindenhirano, Tsu-shi, Mie 514-0111 Japan					
Full Name of Second Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
see above	Residence (City, State	& Country)	<u> </u>	CITIZENSHIP		
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	MAILING ADDRESS (	Complete Street Address incl	uding City, State & Country)			
Full Name of Third Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
see above	Residence (City, State	& Country)		CITIZENSHIP		
,	MAILING ADDRESS (0	Complete Street Address incl	uding City, State & Country)			
Full Name of Fourth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
see above	Residence (City, State	& Country)		CITIZENSHIP		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Fifth Inventor, if any	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
see above	Residence (City, State	& Country)	-	CITIZENSHIP	·	
	MAILING ADDRESS (	Complete Street Address incl	uding City, State & Country)			
Page 2 of 2 (Revised 01/02)		· · · · · · · · · · · · · · · · · · ·		-		
	* DATE OF SIGNATURE					

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Insert Title:	<b>→</b>			
	the specification of which is attached hereto	. If not attached hereto,		
Fill in Appropriate	the specification was filed on			
Information -	<del>-</del>			as
For Use  Without	and amended on		( if ap	mlianhla), and/an
Specification	the specification was filed on		(пар	
Attached:	International Application Numbe	er ·		as PCT
	amended on			•
	I hereby state that I have reviewed and by any amendment referred to above.  I acknowledge the duty to disclose info \$1.56.  I do not know and do not believe the thereof, or patented or described in any pri prior to this application, that the same was application, that the invention has not bee application in any country foreign to the U more than twelve months (six months for do not this invention has been filed in any courepresentatives or assigns, except as follows.  I hereby claim foreign priority benefit or inventor's certificate listed below and has a filing date before that of the application of the state of the state of the application of the state of the state of the application of the state of the	same was ever known or use inted publication in any connot in public use or on sale an patented or made the sunited States of America on designs) prior to this applicantly foreign to the United vs.  ts under Title 35, United States also identified below at	o patentability as defined in Title 37, Consed in the United States of America country before my or our invention the in the United States of America more object of an inventor's certificate issue an application filed by me or my legal ation, and that no application for pate 1 States of America prior to this applicates Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of any foreign application for patent or in the states Code, §119 (a)-(d) of a	before my or our inventions reof or more than one year prior to this led before the date of this le representatives or assignant or inventor's certificate lication by me or my legal
Insert Priority	Prior Foreign Application(s)		•	Deinsten Claima
Information: 🚃	2002-348903	Japan	November 29, 200	02 Priority Claimed
(if appropriate)	(Number)	(Country)	(Month / Day / Year Filed)	Yes No
	(Number)			
	(Number)	(Country)	(Month / Day / Year Filed)	Yes No
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	(Application Number)			(Filing Date)
	All Foreign Applications, if any, for any Patthe Filing Date of this Application:	tent or Inventor's Certificat	e Filed more than 12 months (6 mor	nths for designs) Prior to
nsert Requested information:	Country	Applio	cation Number Date of	Filing (Month/Day/Year)
nsert Prior U.S.	I hereby claim the benefit under Title 35, Un insofar as the subject matter of each of the cliin the manner provided by the first paragrap which is material to patentability as defined filing date of the prior application and the national statement of the prior application and the national statement.	aims of this application is not not not the states of Title 35, United States of Fede	not disclosed in the prior United State Code, §112, I acknowledge the duty ral Regulations. §1.56 which becam	s and/or PCT application to disclose information
pplication(s):	(Application Number)	(Filing Date)	(Status - patented, pe	ending, abandoned)
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YOU MUST COMPLETE THE FOLLOWING:		جي 			, si	
Full Name of First or Sole Inventor:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE	=	DATE*	
Insert Name of Inventor Insert Date This Document is Signed	Shigenobu	UMINO	Shigenobi	Umino	2003.9.11	
Insert Residence	Residence (City, State	& Country)		CITIZENSHIP		
Insert Citizenship	Osaka-shi, Osaka Japan Japan  MAILING ADDRESS (Complete Street Address including City, State & Country)			pan		
Insert Mailing						
Address	c/o Daihen Corporation 2-1-11, Tagawa, Yodogawa-ku, Osaka-shi, Osaka 532-8512 Japan					
Pull Name of Second Inventor, if any:	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
see above	Residence (City, State	& Country)		CITIZENSHIP		
	MAILING ADDRESS (C	complete Street Address incl	uding City State & Country)	<u>-</u>		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Third	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
Inventor, if any	-					
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see above	Residence (City, State	& Country)		CITIZENSHIP		
	MAILING ADDRESS (Complete Street Address including City, State & Country)					
Full Name of Fifth	GIVEN NAME	FAMILY NAME	INVENTOR'S SIGNATURE		DATE*	
Inventor, if any						
see above	Basidanas (City State	P. Country)	<u>!</u>	CITIZENCLUD		
	Residence (City, State & Country)  CITIZENSHIP					
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Page 2 of 2						
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